UNITED STATES DISTRICT COURT

for the

Southern District of New York						
Plaintiff(s V. de Blasio, e	et al.		Civil Action No. 1:21-cv-7863			
SUMMONS IN A CIVIL ACTION						
To: (Defendant's name and address) David Chokshi, in his official capacity of Health Commissioner of the City of New York NYC Department of Health and Mental Hygiene 42-09 28th Street, 14th Floor Long Island City, NY 11101.						
A lawsuit has been file	ed against you.					
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Sujata S. Gibson. Esq. Gibson Law Firm, PLLC 408 W Martin Luther King, Jr St Ithaca, New York 14850 Phone: (607) 327-4125 sujata@gibsonfirm.law						
If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.						
			CLERK OF COURT			
Date:						
			Signature of Clerk or Denuty Clerk			

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 1:21-cv-7863

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

was re	This summons for (na ceived by me on (date)	ume of individual and title, if any)	David Chokshi, Health Commissioner of th	e City of New York			
	☐ I personally serve	d the summons on the indivi	dual at (place)				
			on (date)	; or			
	☐ I left the summons at the individual's residence or usual place of abode with (name)						
	on (date), a person of suitable age and discretion who resides there, on (date), and mailed a copy to the individual's last known address; or						
	☐ I served the summons on (name of individual) , who						
	designated by law to accept service of process on behalf of (name of organization)						
			on (date)	; or			
	☐ I returned the sum	mons unexecuted because		; or			
	☐ Other (specify):						
	My fees are \$	for travel and \$	for services, for a total of \$	0.00			
	I declare under penalty of perjury that this information is true.						
Date:							
		Server's signature					
		Printed name and title					
			Server's address				

Additional information regarding attempted service, etc: